

# Department of Defense INSTRUCTION

October 9, 1986 NUMBER 6205.2

ASD (FM&P/HA)

SUBJECT: Immunization Requirements

References:

- (a) DoD Directive 5136.1, "Assistant Secretary of Defense (Health Affairs)," October 5, 1984
- (b) DoD Instruction 6205.1, "Immunization Requirements for DoD Dependents Schools, Section 6 Schools, and Day Care Centers Operated by the Department of Defense," May 29, 1985
- (c) DoD Directive 6420.1, "Armed Forces Medical Intelligence Center," December 9, 1982
- (d) through (k) , see enclosure 1

#### A. PURPOSE

This Instruction addresses immunization policies for all members of the Armed Forces, civilian employees of the Department of Defense, and all eligible beneficiaries of the military health care system as established by reference (a). It requires implementation of programs that minimize individual illness and disability, days lost from work, and impairment of operational capabilities from conditions that are preventable through immunization. Immunization requirements contained in this Instruction complement immunization, preventive medicine, and health promotion requirements listed in references (a) through (j) and implement the Public Health Service plans for attaining the immunization objectives for the nation.

#### B. APPLICABILITY AND SCOPE

This Instruction:

- 1. Applies to the Office of the Secretary of Defense (OSD), the Military Departments (including their National Guard and Reserve components), the Organization of the Joint Chiefs of Staff (OJCS), and the Defense Agencies (hereafter referred to collectively as "DoD Components").
- 2. Addresses military-unique peacetime and contingency requirements such as global deployment and defense against potential biological warfare agents.
- 3. Provides protection for all eligible beneficiaries against vaccine preventable diseases.

#### **C.** POLICY

It is DoD policy that:

1. The general recommendations of the U.S. Public Health Service, as **promul**-gated by the Centers for Disease Control (CDC) Immunization Practices Advisory Committee (ACIP) and published in CDC's Morbidity and Mortality Weekly Report (MMWR) shall be followed.

- 2. For those activities that are unique to the Military, the Military Departments shall develop appropriate immunization procedures in consultation with the Armed Forces **Epidemiological** Board, Armed Forces Medical Intelligence Center, and Armed Forces Pest Management Board, as required.
- 3. Health care beneficiaries shall be advised of the availability and indications for use of immunizing agents for vaccine preventable diseases. Particular emphasis shall be given to those conditions that affect operational readiness, pose a risk in the community and occupational environment, or are unique to a particular geographic or cultural setting.
- 4. Communicable disease reporting requirements and adverse vaccine reaction reporting requirements of civil authorities shall be complied with through liaison between the military public health jurisdiction and the appropriate local, state, or federal health jurisdiction.
- 5. Persons in specific occupations may need selected vaccines and toxoids in addition to those routinely recommended. Vaccinations shall be provided to all military and civilian employees when it is in the best interest of the Government.

## D. RESPONSIBILITIES

- 1. The Assistant Secretary of Defense (Health Affairs) (ASD(HA)) shall:
- a. Monitor and evaluate the implementation and effectiveness of the immunization program, and make appropriate recommendations to the Secretary of Defense and the Secretaries of the Military Departments concerning changes or improvements in the program.
- b. Establish a Disease Prevention and Control Coordinating Committee that shall:
- (1) Provide a forum for discussion and review of procedures developed concerning the prevention and control of infectious diseases in military and civilian personnel and their dependents worldwide; the epidemiologic aspects of military mustering, training, and deployment activities; and the civilian community and public health implications of unique military activities.
- (2) Identify military-unique requirements for vaccine research, development, and production in consultation with the Armed Forces Medical Intelligence Center, Armed Forces Epidemiological Board, and the Armed Forces Pest Management Board.
- (3) Review Service implementation of DoD policies' stated herein and recommend changes, as needed, to the ASD(HA).
- 2. The <u>Assistant Secretary of Defense (Force Management and Personnel)</u> shall promulgate policy for the use **of** immunizations in the prevention and/or amelioration of occupationally related diseases under DoD Instruction 6055.5 (reference (k)). Coordination shall be maintained between the DoD Disease Prevention and Control Coordinating Committee and the DoD Safety and Occupational Health Policy Council.

## 3. The Secretaries of the Military Departments shall:

- a. Develop and implement general principles and specific procedures to be followed in the prophylactic immunization programs of the Armed Forces. Prophylactic immunization includes the use of any vaccine, toxoid, or other immunizing agent for the prevention of disease, including the maintenance of immune status by reimmunization.
- b. Maintain a medical consultation capability to promulgate the requirements and recommendations herein, as applicable.
- c. Commsistent with the policies of DoD Directive 5000.19 (reference (h)), establish and implement uniform procedures for:
- (1) The identification, reporting, and epidemiologic evaluation of vaccine-associated adverse reactions and illnesses.
- (2) The identification, reporting, epidemiologic evaluation, and prevention of all cases of vaccine preventable illness.

## E. EFFECTIVE DATE AND IMPLEMENTATION

This Instruction is effective immediately. Forward two copies of implementing documents to the Assistant Secretary of Defense (Health Affairs) within 120 days.

Chappinan B. Cox
Assistant Secretary of Defense

(Force Management & Personnel)

William Mayer, M.D.

Assistant Secretary of Defense (Health Affairs)

Enclosure--1
References

### REFERENCES, continued

- (d) DoD Directive 6015.5, "Joint Use of Military Health and Medical Facilities and Services," February 5, 1981
- (e) DoD Instruction 6040.33, "Medical Diagnoses and Surgical Operations Nomenclature and Statistical Classification," May 12, 1986
- (f) DoD Directive 5154.8, "Armed Forces Epidemiological Board," November 6, 1978
- (g) OMB Form No. 68-R1681, "Report of Illness Following Vaccination," 1979
- (h) DoD Directive 5000.19, "Policies for the Management and Control of Information Requirements," March 12, 1976
- (i) Assistant Secretary of Defense (Health Affairs) Memorandum, "DoD Immunization and Infectious Disease Control Coordinating Committee," March 22, 1985
- (j) Assistant Secretary of Defense (Health Affairs) Memorandum, "Protection Against Hepatitis B Virus Infection," April 3, 1985
- (k) DoD Instruction 6055.5, "Industrial Hygiene and Occupational Health," April 30, 1980